

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>7-24-02</u>		2 Serial/Patent # <u>10/075432</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$							
	Amendment			\$							
	Extension of Time			\$							
	Notice of Appeal/Appeal			\$							
	Petition		6-6-02	\$							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
	Other			\$							
			7 TOTAL AMOUNT OF REFUND	\$ <u>130</u>							
8 TO BE REFUNDED BY:											
10 REASON:		Treasury Check									
	Overpayment	✓	Credit Deposit A/C #:								
	Duplicate Payment		9 <table border="1" style="display: inline-table; text-align: center; width: 150px;"><tr><td>0</td><td>6</td><td>--</td><td>1</td><td>0</td><td>5</td><td>0</td></tr></table>		0	6	--	1	0	5	0
0	6	--	1	0	5	0					
	No Fee Due (Explanation):										
Petition dismissed as moot.											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>Karen Creeasy</u>		TITLE: <u>Pet. Exmr.</u>									
SIGNATURE: <u>Karen Creeasy</u>		PHONE: <u>305-8859</u>									
OFFICE: <u>DAC for Patents</u>											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: <u>Alice Kelly</u>		DATE: <u>7/29/02</u>									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance  
Refund Branch  
Crystal Park One, Room 802B